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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL  Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/795,805
	Filing Date	March 8, 2004
	First Named Inventor	Richard K. Squires
	Art Unit	3748
	Examiner Name	Thai Ba Trieu
	Attorney Docket Number	2516.STS.CN

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. Submission required under 37 C.F.R. §1.114

- a. Previously submitted
 - i. Consider the amendment(s)/reply under 37 C.F.R. §1.116 previously filed on May 16, 2005
(Any unentered amendment(s) referred to above will be entered).
 - ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
 - iii. Other _____
- b. Enclosed
 - i. Amendment/Reply
 - ii. Affidavit(s)/Declaration(s)
 - iii. Information Disclosure Statement (IDS)
 - iv. Other Fee Transmittal, Return Postcard

2. Miscellaneous

- a. Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)

b. Other _____

3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

- a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50-0881.
 - i. RCE fee required under 37 C.F.R. §1.17(e)
 - ii. Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
 - iii. Other: Charge any additional fees and credit any overpayment.

b. Check in the amount of \$ _____ enclosed

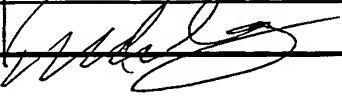
c. Payment by credit card. (Form PTO-2038 enclosed)

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED

Name (Print/Type)	Frank W. Compagni	Registration No. (Attorney/Agent)	40,567
Signature			
Date	June 15, 2005		

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to : Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type)	Frank W. Compagni	Express Mail No.	EV 517448321 US
Signature			
Date	June 15, 2005		

		Complete if Known	
FEE TRANSMITTAL for FY 2005 <i>JUN 15 2005</i>		Application Number	10/795,805
		Filing Date	March 8, 2004
		First Named Inventor	Richard K. Squires
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Thai Ba Trieu
TOTAL AMOUNT OF PAYMENT		Art Unit	3748
(\$) 395.00		Attorney Docket No.	2516.STS.CN

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-0881 Deposit Account Name: Morriss O'Bryant Compagni, PC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s)
under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments |

FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3, or for Reissues, each independent claim more than in the original patent	200	100
Multiple Dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Small Entity Fee (\$)
-20 or HP=	X _____	= _____			

HP= highest number of totals claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity Fee (\$)
-3 or HP	X _____	= _____		

HP= highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

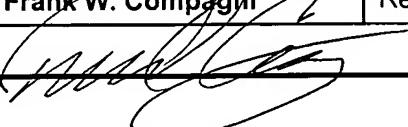
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35. U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100=	/50=	(round up to a whole number) x _____	= _____	Fees Paid (\$)

4. OTHER FEE(S)

Other: Request for Continued Examination \$395
 Other: _____

SUBMITTED BY

Name (Print/Type)	Frank W. Compagni	Registration No.	40,567	Telephone	(801) 478-0071
Signature				Date	June 15, 2005